

|                                    |                                |                     |                               |   |
|------------------------------------|--------------------------------|---------------------|-------------------------------|---|
| <b>SERIAL NUMBER</b><br>09/069,419 | <b>FILING DATE</b><br>04/29/98 | <b>CLASS</b><br>348 | <b>GROUP ART UNIT</b><br>2712 | <b>ATTORNEY DOCKET NO.</b><br>1232-4440 |
|------------------------------------|--------------------------------|---------------------|-------------------------------|---|

  

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| <b>APPLICANT</b> | <b>SHIGEO YOSHIDA, YOKOHAMA-SHI, JAPAN.</b><br><br><b>**CONTINUING DOMESTIC DATA*****</b><br><b>VERIFIED</b><br><u>  X  </u><br><br><b>**371 (NAT'L STAGE) DATA*****</b><br><b>VERIFIED</b><br><u>  V  </u><br><br><br><br><br><b>**FOREIGN APPLICATIONS*****</b><br><b>VERIFIED</b> <b>JAPAN</b> <b>9-112806</b> <b>04/30/97</b><br><u>  X  </u> |  |
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**IF REQUIRED, FOREIGN FILING LICENSE GRANTED 05/05/99**

|  |                                |                             |                           |                                |
|--|--------------------------------|-----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged <u>  X  </u><br><div style="display: flex; justify-content: space-between; font-size: small;"> <span>Examiner's Initials</span> <span>Initials</span> </div> | <b>STATE OR COUNTRY</b><br>JPX | <b>SHEETS DRAWING</b><br>11 | <b>TOTAL CLAIMS</b><br>32 | <b>INDEPENDENT CLAIMS</b><br>8 |
|--|--------------------------------|-----------------------------|---------------------------|--------------------------------|

  

|                |  |
|----------------|--|
| <b>ADDRESS</b> | <b>MORGAN &amp; FINNEGAN</b><br><b>345 PARK AVENUE</b><br><b>NEW YORK NY 10154</b> |
|----------------|--|

  

|              |   |
|--------------|---|
| <b>TITLE</b> | <b>PORTABLE ELECTRONIC APPARATUS, IMAGE PROCESSING METHOD, PHOTOGRAPHIC APPARATUS, AND COMPUTER READABLE RECORDING MEDIUM</b> |
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| <b>FILING FEE RECEIVED</b><br><br>\$1,594 | <b>FEES: Authority has been given in Paper</b><br>No. _____ to charge/credit <b>DEPOSIT ACCOUNT</b><br>NO. _____ for the following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|---|---|---|